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|---|---|----------------------|------------------------------------|------------------------|--------------------|-------------------------------------|------------------|-----------|----------------------------------|------------------------|---|----------------------------|--|
| CLAIMS AS FILED – PART I (Column 1) (Column 2) | | | | | | | | | SMALL I | ENTITY | OR | OTHER THAN SMALL ENTITY | |
| FOR BASIC FEE | | | NUMBER FILED | | | NUMBER EXTRA | | | RATE | FEE |] | RATE | 555 |
| (37 CFR 1.16(a)) | | | | | | | |]. | | š | 1 | KAIE | FEE |
| TOTAL CLAIMS (37 CFR 1.16(c)) | | | minus 20 = | | 20 = | • | | 1 | 'X \$ = | | OR | | \$ |
| INDEPENDENT CLAIMS (37 CFR 1.16(b)) | | IMS | minus 3 = | | 3 = | • | | 1 | | <u> </u> | OR | × \$= | |
| MULTIPLE DEPENDENT CL | | | | | | D 4 40/4/\ | | ┨ | × \$= | | OR | × \$= | ļ |
| | | | | | | | j | + \$= | | OR | + \$= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2. | | | | | | | TOTAL | | OR | · TOTAL | | | |
| CLAIMS AS AMENDED PART II | | | | | | | | | | | | | , |
| | | ~ · · · · | umn 1) | | | Column 2) (Column 3) | | | SMALL ENTITY | | OR | | R THAN ENTITY |
| AMENDMENT A PIGO | 4/6 | REA | LAIMS MAINING FTER NDMENT | | PRE | GHEST JMBER VIOUSLY ID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL |
| (37 C | Total FR 1.16(c)) | <u> </u> | 19 | Minus | " | 2/ | = | 1 | X \$ = | | صعد | | FEE |
| Z Inder (37 ci | endent FR 1.16(b)) | • | 4 | Minus | *** | 4 | = | 1 | x \$ = | | · · · · · · | X \$= | |
| ₹ FIRS | T PŘESENT | TATION C | F MULTIPLI | E DEPEND | ENT CLA | AIM (37 CE | R 1 16(d)) | | | | OR | X \$= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) | | | | | | | |] [| + \$= | | OR | +\$= TOTAL | |
| | | | | | | | | ADD'L FEE | | OR | ADD'L FEE | | |
| (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST | | | | | | | ır | | | 1 | Jana Para | | |
| (37 CF UM) (37 CF UM) (37 CF | 917 | AF. | AINING TER IDMENT | | NU PRE\ PAI | MBER /IOUSLY D FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| (37 CF | Total R 1.16(c)) | Ŀ, | 19 | Minus | | 21 | - | | x 3 = | | OR | X \$ = | |
| Indep (37 CF | endent R 1.16(b)) | | 5 | Minus | *** | 4 | 1 | | x \$ = | | | × 200 | 200 |
| ₹ FIRS | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,15(d)) | | | | | | | | | | OR . | | 200 |
| | | | | | | | | Ļ | TOTAL | | OR | + \$ = TOTAL | |
| | | | | | | | | | ADD'L FEE | | OR | ADD'L FEE | 200 |
| <u>.,</u> | | | mn 1) AIMS | | | lumn 2) HEST | (Column 3) | Г | | | | · | |
| O Indep | | AF | AINING TER DMENT | | NUI PREV | MBER TOUSLY D FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| (37 CF | otal R 1.16(c)) | • | | Minus | ** | | = | | X \$ = | | OR | X \$ = | |
| Z Indep | endent R 1.16(b)) | • | | Minus | *** | | = | | x \$ = | | ľ | | |
| FIRST | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR.1.16(d)) | | | | | | | | | | OR | X \$= | |
| (0.21 35,10(0)) | | | | | | | | L | + \$= TOTAL | | OR | + \$ = | |
| * If the entry in column 1 is less than the entry in column 2 write 10" in column 3 | | | | | | | | | | | | | |
| " If the | "Highest N "Highest N | Number I Iumber F | Previously l Previously f | Paid For* Paid For* | IN THIS RIHT NI | SPACE is | less than 20, | enter | "20". 3". mber found in th | | 1 • | | |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO HOT SEND FEES OP COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.